



# BUSINESS LICENSE COMMISSION

## COUNTY OF LOS ANGELES

374 KENNETH HAHN HALL OF ADMINISTRATION

500 WEST TEMPLE STREET

LOS ANGELES, CA 90012

(213) 974-7691

[www.board.co.la.ca.us/blc](http://www.board.co.la.ca.us/blc)



### MEMBERS

STEVEN AFRIAT

*PRESIDENT*

RENÉE CAMPBELL

*VICE-PRESIDENT*

SARA VASQUEZ

*SECRETARY*

JAMES BARGER

*COMMISSIONER*

SHAN LEE

*COMMISSIONER*

January 07, 2013

Ramiro Bonilla  
Cue Time Family Billard & Deli  
3417 East Milton Street  
Pasadena, CA 91107

### **HEARING ON APPLICATION FOR BILLARD ROOM** **BUSINESS LICENSE ID #134213**

Dear Applicant:

The Business License Commission will hold a hearing on the above matter on **Wednesday, January 16, 2013 at 9:00 a.m.** in Room 374-A, 500 West Temple Street, Los Angeles, CA 90012. Your presence is requested at this hearing. If you are unable to attend you may authorize a representative to appear on your behalf. The representative must present signed and duly notarized letter giving authorization and the reasons you are unable to appear.

### **RIGHT TO REPRESENTATION / FOREIGN LANGUAGE SPEAKERS**

**You have the right to be represented at this hearing by an attorney or other individual of your choosing and at your own cost.** In the absence of a representative, you must represent yourself and the hearing will proceed as scheduled.

If you require a translator, you must arrange at your own cost to have present at the hearing either **a professional/certified interpreter or other person who is fluent in both English and your native language.** If you are unable to locate an interpreter, please contact our office and you will be provided a list of interpreting services.

Parking is available at your cost; a map is enclosed for your convenience. **Please note proceedings begin promptly at 9:00 a.m. The Business License Commission reserves the right to reschedule your hearing to a later date for failure to timely appear.**

Sincerely,

STEVEN AFRIAT  
President

Lupe Duron  
Commission Staff

NOTICE TO PRINTER  
STATE LAW REQUIRES THAT THIS  
LEGAL ADVERTISEMENT SHALL BE SET  
IN TYPE NOT SMALLER THAN NONPAREIL ( 6 PT. )

CUSTOMER CODE : Z 91085

NEWSPAPER :.....SAN GABRIEL VALLEY TRIBUNE

PUBLISH 3 TIMES

1<sup>ST</sup> PUBLISHING DATE:.....12/27/2012  
2<sup>ND</sup> PUBLISHING DATE:.....01/03/2013  
3<sup>RD</sup> PUBLISHING DATE:.....01/10/2013

REPRINTS ORDERED: NONE

NOTICE ON HEARING TO CONDUCT

BILLIARD ROOM

NOTICE IS HEREBY GIVEN THAT APPLICATION HAS BEEN  
MADE TO THE LOS ANGELES COUNTY BUSINESS LICENSE  
COMMISSION TO CONDUCT

ADVANCE PROOF REQUESTED

ADDRESS OF PREMISES:..... 19706 E. ARROW HIGHWAY  
COVINA, CA 91724  
NAME OF APPLICANT:..... CUE TIME FAMILY BILLARD & DELI /  
RAMIRO BONILLA  
CUE TIME FAMILY BILLARD & DELI  
DATE OF HEARING:..... 01/16/2013  
TIME OF HEARING:..... 09:00 A.M.

"ANY PERSON HAVING OBJECTIONS TO THE GRANTING OF  
THE LICENSE MAY, AT ANY TIME PRIOR TO THE DATE ABOVE NAMED, FILE WITH THE BUSINESS  
LICENSE COMMISSION HIS OBJECTIONS IN WRITING GIVING OF THE HEARING AND BE HEARD  
RELATIVE THERETO"

OFFICE OF THE COMMISSION:

OFFICE OF THE COMMISSION  
500 W. TEMPLE STREET, RM 374  
LOS ANGELES, CA 90012

RETURN TO:

LOS ANGELES COUNTY TAX COLLECTOR  
BUSINESS LICENSE SECTION  
225 N. HILL STREET RM. 109  
LOS ANGELES, CA 90012



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90012



**BUSINESS LICENSE APPLICATION REFERRAL  
SUMMARY SHEET**

KIND OF BUSINESS: **BILLIARD ROOM**

ADDRESS OF BUSINESS: **19706 E ARROW HIGHWAY, COVINA, CA 91724**

TELEPHONE: **(626) 915-2597**

OWNER OF BUSINESS: **RAMIRO BONILLA**

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **CUE TIME FAMILY BILLARD & DELI**

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

	<u>APPROVED</u>	<u>DATE</u>	<u>SIGNATURE</u>
<input type="checkbox"/> 1. Animal Care & Control			
<input type="checkbox"/> 2. Risk Management			
<input checked="" type="checkbox"/> 3. Building & Safety	YES	12/05/12	dmiles
<input checked="" type="checkbox"/> 4. Fire Department	YES	11/21/08	dmiles
<input type="checkbox"/> 5. Public Health			
<input type="checkbox"/> 6. Treasurer & Tax Collector			
<input checked="" type="checkbox"/> 7. Business License Commission			
<input checked="" type="checkbox"/> 8. Sheriff Department	YES	12/24/07	dmiles
<input checked="" type="checkbox"/> 9. Regional Planning Commission	YES	07/13/07	dmiles
<input type="checkbox"/> 10. Weights and Measures			
<input checked="" type="checkbox"/> 11. Publishing	YES	12/27/12	dmiles
<input type="checkbox"/> 12. Public Works - EPD			
<input checked="" type="checkbox"/> 13. Sheriff Fingerprint	YES	12/24/07	dmiles

Conditions:

TREASURER AND TAX COLLECTOR  
APPLICATION FOR BUSINESS LICENSE

FEE \$ \_\_\_\_\_

I.D.# 134213

TYPE OF BUSINESS

Public Eating / coin operated Phonographic  
Billiard Room

ADDRESS OF BUSINESS

19706 E Arrow Highway

COVINA CA 91724

BUS. PHONE#(626) 915-25-97

"DBA" CUE TIME Family Billiards & Deli

APPLICANT(S) FULL NAME

RAMIRO BONILLA

HOME ADDRESS \_\_\_\_\_

MAILING ADDRESS

SAME

HOME PHONE # ( \_\_\_\_\_ ) \_\_\_\_\_

SS# \_\_\_\_\_

ST. BD. OF EQUAL.# \_\_\_\_\_

PLACE OF BIRTH \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_

DRIVER'S LIC.# \_\_\_\_\_

EXP. DT \_\_\_\_\_

SEX \_\_\_\_\_

HT \_\_\_\_\_

WT \_\_\_\_\_

EYES BROWN

HAIR B/K

"CORPORATION STATUS"

EXACT CORPORATE NAME \_\_\_\_\_

DATE OF INCORPORATION \_\_\_\_\_

INCORPORATED IN STATE OF \_\_\_\_\_

NAMES OF OFFICERS

ADDRESSES

TITLES

The information contained herein is true and correct to the best of my knowledge and belief. As a condition of the issuance of the license applied for, I agree; to submit any additional information that may be required; to conduct all phases of this business in accordance with regulations established for such business and to maintain all trucks or equipment that may be used in connection therewith, in conformance with all applicable laws, ordinances and regulations.

DATE 7-11-07 APPLICANT'S SIGNATURE \_\_\_\_\_

APPLICATION TAKEN BY: \_\_\_\_\_

DATE \_\_\_\_\_



COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR  
REVENUE & ENFORCEMENT DIVISION  
BUSINESS LICENSE SECTION



TO: DEPARTMENT OF REGIONAL PLANNING  
320 W. TEMPLE STREET, 13<sup>TH</sup> FLOOR, ROOM 1360  
LOS ANGELES, CA 90012  
(213) 974-6411

FROM: BUSINESS LICENSE SECTION  
225 N. HILL STREET, ROOM 109  
LOS ANGELES, CA 90012  
(213) 974-2011

DEPARTMENT OF REGIONAL PLANNING REQUIRES A FEE  
MONDAY thru THURSDAY 7:30 AM - 6:00 PM. Closed on Friday

RBUS # \_\_\_\_\_

DATE: Oct 10, 2006

ID # \_\_\_\_\_

BUSINESS CLASSIFICATION AND CODE Billiard Room (0441) 2092

Public Eating, Con. (0324) (0441) 2092

BUSINESS ADDRESS: 19706 E. Arrow Highway

CITY: Corona, CA ZIP CODE: 91724

NAME OF OWNER: Ramiro Bonilla

D.B.A./ NAME OF BUSINESS: One Stop Family Billiard - Deli.

MAILING ADDRESS: Same as Above

PHONE NUMBER: (626) 915-25-97

ZONE: \_\_\_\_\_

APPROVED: \_\_\_\_\_ DENIED: \_\_\_\_\_

REMARKS: approved by CUP 04-094 operation  
subject to the conditions therein

SIGNATURE: [Signature] DATE: JUL 11 2007

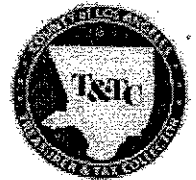
REGIONAL PLANNING STAMP

JD:jd



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970



**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: **BILLIARD ROOM**

ADDRESS OF BUSINESS: **19706 E ARROW HIGHWAY, COVINA, CA 91724**

TELEPHONE: **(626) 915-2597**

OWNER OF BUSINESS: **RAMIRO BONILLA**

CAL. DR. LIC.# : .

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **CUE TIME FAMILY BILLARD & DELI**

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

*Received  
8/7/07*

**SHERIFF FINGERPRINT**

**LA COUNTY**



☒ **APPROVAL**



☐ **DENIAL**

RECOMMENDATION:

*Approval With Conditions*

SIGNATURE:

*Jacqueline Harris*

DATE:

*12/13/07*

## **RECOMMENDED BILLIARD ROOM CONDITIONS**

**File Number 107-01130-3410-446**

**Cue Time Family Billiard & Deli**

**19706 E. Arrow Hwy.**

**Covina, CA 91724**

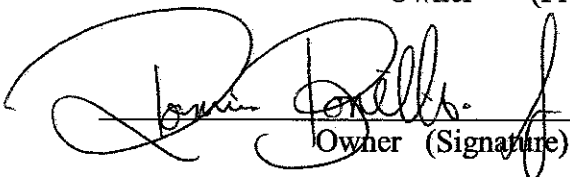
1. The entire premises is subject to inspection at anytime. Any locked or otherwise secured rooms shall be opened immediately upon request. Any keys, combinations or other tools of knowledge necessary to comply shall be on the premises at all times.
2. During the hours of operation, there will be an owner/manager on the premises at all times. This designated person must be capable of communicating effectively with employees, patrons and any government or law enforcement official. This person shall have State of California Identification on the premises at all times.
3. Hours of operation must be strictly adhered to. A Billiard Room shall not be kept open or allow or permit any game to be played therein from 2:00 a.m. until 6:00 a.m. of any day.
4. The owner, manager, or other person in charge shall not allow or permit any person under the age of 18 years to enter unless the minor is accompanied by one of his parents or by his guardian; or his parent or guardian personally presents a written consent to the owner and **alcoholic beverages are neither sold nor served on the premises.**
5. It shall be unlawful for any person who is intoxicated or under the influence of any drug to enter, be, or remain in the licensed premises, Section 25602 (a) Business and Professions Code.
6. A copy of these and all valid licenses shall be posted and maintained in public view, conspicuous to all employees of the location.
7. Gambling is prohibited and a suitable sign shall be posted in a conspicuous place to that effect.
8. The maximum number of occupants shall be established by the Fire Department and shall be posted in a conspicuous location on the premises. This occupancy limit shall not be violated
9. The floor plan and room use shall not be altered without prior approval by the Sheriff's License Detail.

10. The licensee shall comply at all times with Section 6404.5 of the California Labor Code and shall post "No Smoking" signs at all entrances and not furnish smoking convenience items.
11. **FAILURE TO COMPLY WITH THE FOREGOING CONDITIONS AND ANY APPLICABLE LAW SHALL BE CAUSE FOR THE SUSPENSION OR REVOCATION OF THE PERMIT.**

I/We have read and understand the above recommended conditions and would not object to their being imposed by the licensing authority.

RAMIRO BONILLA JR  
Owner (Print)

12-6-07  
Date

  
Owner (Signature)

Jacqueline Harris  
Sheriff's Dept. Representative

12/6/07  
Date



**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

GRCV

KIND OF BUSINESS: BILLIARD ROOM

ADDRESS OF BUSINESS: 19706 E ARROW HIGHWAY, COVINA, CA 91724

TELEPHONE: (626) 915-2597

OWNER OF BUSINESS: RAMIRO BONILLA

CAL. DR. LIC.#:

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: CUE TIME FAMILY BILLARD &amp; DELI

MAILING ADDRESS:

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: NEW LICENSE

**FIRE DEPARTMENT  
LA COUNTY**

APPROVAL



DENIAL

RECOMMENDATION: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: 11/19/08

BASIC LICENSE NO. 0441

DATE 11/13/08

IDENTIFICATION NUMBER 134213

**COUNTY OF LOS ANGELES  
TREASURER AND TAX COLLECTOR**

225 N. Hill Street Room 109, P.O. Box 54970, Los Angeles, CA 90054-0970

**BUSINESS LICENSE  
APPLICATION REFERRAL**

KIND OF BUSINESS: **BILLIARD ROOM**

ADDRESS OF BUSINESS: **19706 E ARROW HIGHWAY, COVINA, CA 91724**

TELEPHONE: **(626) 915-2597**

OWNER OF BUSINESS: **RAMIRO BONILLA**

CAL. DR. LIC.# :

NAME OF PERSON FINGERPRINTED:

FICTITIOUS NAME: **CUE TIME FAMILY BILLARD & DELI**

MAILING ADDRESS: :

DATE THAT YOU STARTED BUSINESS:

PREVIOUS OWNER'S NAME, IF KNOWN:

THIS IS AN APPLICATION FOR: **NEW LICENSE**

---

**BUILDING & SAFETY**

**LA COUNTY**

☒ **APPROVAL**

☐ **DENIAL**

RECOMMENDATION: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

DATE: 11-20-12

BASIC LICENSE NO. **0441**

DATE **01/08/10**

IDENTIFICATION NUMBER **134213**